Case 23-40073 Doc 9 Filed 01/19/23 Entered 01/19/23 10:00:34 Desc Main Document Page 1 of 39

Fill in this information	to identify your case	and this filing:		
Debtor 1	Michael	James	Hardy	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankru	uptcy Court for the:		Eastern District of Texa	<u>s</u>
Case number	23-40073			

### Official Form 106A/B

### Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

1.	Do you own or have any legal or equitable inte  ✓ No. Go to Part 2.  ☐ Yes. Where is the property?	rest in any residence, building, land, or similar prop	perty?		
	Street address, if available, or other description  City State ZIP Code  County	What is the property? Check all that apply.  Single-family home Duplex or multi-unit building	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.		
		Manufactured or mobile home	Current value of the entire property?	Current value of the portion you own?	
		☐ Investment property ☐ Timeshare ☐ Other	Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.		
		Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Check if this is com	nmunity property	
		Other information you wish to add about this item property identification number:			
2.		r all of your entries from Part 1, including any entrienr here		\$0.00	

Case 23-40073 Doc 9 Filed 01/19/23 Entered 01/19/23 10:00:34 Desc Main Document Page 2 of 39

Debt	or 1	Michael First Name	James Middle Name	Hardy  Last Name		Case number (if known)	23-40073
Part	2: [	Describe Your Vel	nicles				
you 0 3. <b>(</b>	own th	at someone else driv	ves. If you lease a vel	est in any vehicles, whether hicle, also report it on Sched es, motorcycles			
3	3.1 Ma		<u>Kia</u> Sorento	Who has an interest in the  Debtor 1 only	property? Check one.	Do not deduct secured claim amount of any secured claim	ns on Schedule D: Creditors
	Mc Ye:	odel: ar:	2014	Debtor 2 only Debtor 1 and Debtor 2 o	•	Who Have Claims Secured  Current value of the entire property?	Current value of the portion you own?
	•	proximate mileage:	184000	☐ Check if this is communicate (see instructions)		\$6,700.00	\$6,700.00
	you h	he dollar value of the	t 2. Write that number	er all of your entries from Pa er here			\$6,700.00
Do	you ov	wn or have any legal	or equitable interes	t in any of the following iter	ms?		Current value of the portion you own? Do not deduct secured claims or exemptions.
E	Examp ☐ No	hold goods and furn bles: Major appliance s. Describe	Couch - \$150 Loves and chairs - \$200 W	china, kitchenware seat - \$75 TV cabinet - \$100 Vashing machine - \$150 Dry os and accessories - \$25	·	·	\$1,275.00
E	_	les: Televisions and collections; elec		, stereo, and digital equipme ling cell phones, cameras, n		scanners; music	
[	☑ No ☑ Yes	s. Describe	Televisions (2) - \$20	00 DVD player - \$50 Compu	ter - \$150 Cell phone - \$	5150	\$550.00
		tibles of value	gurines: paintings or	ints, or other artwork; books	, pictures, or other art of	piects:	
	<i>∡amp</i> <b>√</b> No		•	ions; other collections, mem	•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
[	_	s. Describe					

Case 23-40073 Doc 9 Filed 01/19/23 Entered 01/19/23 10:00:34 Desc Main Document Page 3 of 39

Debtor 1 Hardy Case number (if known) 23-40073 Michael James First Name Middle Name Last Name 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ☐ No Yes. Describe...... Golf clubs \$100.00 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe...... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No Clothing and shoes \$300.00 Yes. Describe...... 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, Glasses \$50.00 ✓ Yes. Describe....... 13. Non-farm animals Examples: Dogs, cats, birds, horses **√** No Yes. Describe...... 14. Any other personal and household items you did not already list, including any health aids you did not list **√** No ☐ Yes. Describe...... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here \$2,275.00 Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition No \$5.00 Case 23-40073 Doc 9 Filed 01/19/23 Entered 01/19/23 10:00:34 Desc Main Document Page 4 of 39

Debtor 1 Hardy Case number (if known) 23-40073 Michael **James** First Name Middle Name Last Name 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. No **☑** Yes..... Institution name: 17.1. Savings account: Wells Fargo savings account no. 9050 \$0.07 Wells Fargo checking account no. 0234 \$730.00 17.2. Checking account: 17.3. Checking account: Wells Fargo checking account no. 1857 \$51.00 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts **√** No Yes..... Institution or issuer name: Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **√** No Yes. Give specific information about them..... Name of entity: % of ownership: Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. **√** No Yes. Give specific information about them..... Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ No Yes. List each account separately. Type of account: Institution name: \$22,840.37 Retirement account: TRS

Case 23-40073 Doc 9 Filed 01/19/23 Entered 01/19/23 10:00:34 Desc Main

Page 5 of 39 Document Debtor 1 Michael Hardy Case number (if known) 23-40073 **James** Middle Name First Name Last Name 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others **√** No ☐ Yes..... Institution name or individual: Electric: Gas: Heating oil: Security deposit on rental unit: \_ Prepaid rent: Telephone: Water: Rented furniture: Other: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) **√** No ☐ Yes..... Issuer name and description: Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). **✓** No Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c): Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

information about them....

**√** No

Yes. Give specific

Case 23-40073 Doc 9 Filed 01/19/23 Entered 01/19/23 10:00:34 Desc Main Document Page 6 of 39

Michael James Hardy Case number (if known) 23-40073

Debt	OI I	Michael	James	пагцу		Case number (if known)	23-40073
		First Name	Middle Nan	e Last Name			
26.	Patents, co	opyrights, trademar	ks. trade secr	ets, and other intellectual p	property		
				, proceeds from royalties a		ts	
	✓ No	miorriot domain na	inioo, wobolio	, procedu nom royamos a	na noononig agroomon	.0	
	Yes. Gi	va anasifia					]
		tion about them					
27.	l iconsos f	franchises, and othe	ar general into	naihles			
21.			_	es, cooperative association	holdings liquor licens	00	
	<u> </u> Ехатрісз.	professional licens		cs, cooperative association	r riolalings, liquor liceris	03,	
	<b>√</b> No						
	_	ve specific					
		tion about them					
Mone	ey or prope	rty owed to you?					Current value of the
							portion you own?  Do not deduct secured
							claims or exemptions.
28.	Tax refund	s owed to you					
	<b>√</b> No						
		ive specific informati	on about			Federal:	
	th	em, including wheth	er you			i euciai.	
		ready filed the return				State:	
	tn	e tax years				Local:	
20	Comilly our						
29.	Family sup	-	برموماناه مدير	acusal cumport, shild cump	ort maintananaa diyara	a cattlement preparty cattleme	<b>~</b> *
	Examples.	Past due or lump s	sum allmony, s	pousai support, criiid suppo	nt, maintenance, divorc	e settlement, property settlement	П
	<b>√</b> No						
	Yes. G	ive specific informati	on			Alimony	
						Alimony:	
						Maintenance:	
						Support:	
						Divorce settlement:	
						Property settlement:	
30.	Other amo	unts someone owe	s you				
	Examples:					pay, workers' compensation,	
		Social Security ber	nefits; unpaid	oans you made to someone	e else		
	<b>☑</b> No						1
	☐ Yes. G	ive specific informati	on				
0.4	lata						
31.		n insurance policies		. haalth aguitana	ICA), and the first	ala an nambaria da asses	
		nealth, disability, o	i ille insurance	e; health savings account (F	ioa); credit, nomeowne	is, or renter's insurance	
	□ No						
	Yes. Na	ame the insurance c each policy and list	ompany its value	Company name:		Beneficiary:	Surrender or refund value:
	JI	caon policy and list	+ αιασ	Dearborn term life insur	ance	Debtor's child	\$0.00
							<del></del>

Case 23-40073 Doc 9 Filed 01/19/23 Entered 01/19/23 10:00:34 Desc Main Document Page 7 of 39

Debtor 1 Hardy Case number (if known) 23-40073 Michael **James** First Name Middle Name Last Name 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ☐ Yes. Give specific information........ 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue **√** No ☐ Yes. Describe each claim..... Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims **☑** No ☐ Yes. Describe each claim..... 35. Any financial assets you did not already list **√** No ☐ Yes. Give specific information....... Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here..... \$23,626.44 Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. Yes. Go to line 38. Current value of the portion you own? Do not deduct secured claims or exemptions. 38. Accounts receivable or commissions you already earned **√** No ☐ Yes. Describe...... 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices **√** No ☐ Yes. Describe......

Case 23-40073 Doc 9 Filed 01/19/23 Entered 01/19/23 10:00:34 Desc Main Document Page 8 of 39

Debtor 1 Michael Hardy Case number (if known) 23-40073 **James** First Name Middle Name Last Name 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade ☐ Yes. Describe...... 41. Inventory **√** No ☐ Yes. Describe...... 42. Interests in partnerships or joint ventures **√** No ☐ Yes. Describe...... Name of entity: % of ownership: 43. Customer lists, mailing lists, or other compilations **√** No Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? ☐ Yes. Describe...... 44. Any business-related property you did not already list **√** No ☐ Yes. Give specific information..... Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached \$0.00 for Part 5. Write that number here...... Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? ✓ No. Go to Part 7. Yes. Go to line 47. Current value of the portion you own? Do not deduct secured claims or exemptions. 47. Farm animals Examples: Livestock, poultry, farm-raised fish **√** No ☐ Yes.....

Case 23-40073 Doc 9 Filed 01/19/23 Entered 01/19/23 10:00:34 Desc Main Document Page 9 of 39

Debt	or 1	Michael	James	Hardy	Case number (if known)	23-40073
		First Name	Middle Name	Last Name		
48.	Crops—eith	er growing or	harvested			
	<b>☑</b> No					
	Yes. Give					
	morman	on				
49.		shing equipme	ent, implements, machinery,	fixtures, and tools of trade		
	✓ No ☐ Yes					
	<b>—</b> res					
50.	Farm and fis	shing supplies	, chemicals, and feed			
	<b>☑</b> No					
	☐ Yes					
51.	-	nd commercia	I fishing-related property yo	u did not already list		
	✓ No					
	Yes. Give	e specific on				
52.				ncluding any entries for pages	s you have attached	\$0.00
	ioi i ait o. w	THE HIAL HUILL	oci nere		<del>-</del>	\$0.00
Par	t 7: Descri	be All Prope	erty You Own or Have ar	n Interest in That You Did	Not List Above	
	_					
53.			ty of any kind you did not alr , country club membership	eady list?		
	✓ No	oddon dodd	, country olds mornsoromp			
	Yes. Give					
	information	on				
54.	Add the doll	ar value of all	of your entries from Part 7.	Write that number here	→	\$0.00
Par	t 8: List th	e Totals of I	Each Part of this Form			
55.	Part 1: Total	real estate, lir	ne 2		<b></b>	\$0.00
56.	Part 2: Total	vehicles, line	5	\$6,700.00		
57.	Part 3: Total	personal and	household items, line 15	\$2,275.00		
58.	Part 4: Total	financial asse	ets, line 36	\$23,626.44		
59.	Part 5: Total	business-rela	ted property, line 45	\$0.00		
60.	Part 6: Total	farm- and fish	ning-related property, line 52	\$0.00		

Case 23-40073 Doc 9 Filed 01/19/23 Entered 01/19/23 10:00:34 Desc Main Document Page 10 of 39

Debtor 1 Michael Hardy Case number (if known) 23-40073 **James** First Name Middle Name Last Name 61. Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61..... \$32,601.44 Copy personal property total→ \$32,601.44 \$32,601.44 63. Total of all property on Schedule A/B. Add line 55 + line 62.....

### Case 23-40073 Doc 9 Filed 01/19/23 Entered 01/19/23 10:00:34 Desc Main Document Page 11 of 39

Fill in this information	n to identify your case	:	
Debtor 1	Michael	James	Hardy
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bank	ruptcy Court for the:		Eastern District of Texas
Case number	23-40073	<u> </u>	
(if known)			

#### Official Form 106C

Part 1: Identify the Property You Claim as Exempt

### Schedule C: The Property You Claim as Exempt

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

<ol> <li>Which set of exemptions are you claiming? Color</li> <li>You are claiming state and federal nonbanking.</li> <li>You are claiming federal exemptions. 11 U.S.</li> <li>For any property you list on Schedule A/B that</li> </ol>	ruptcy exemptions. 11 U.S	S.C. § 522(b)(3)	
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption.	
Brief description: 2014 Kia Sorento  Line from Schedule A/B: 3.1	\$6,700.00	\$2,477.00  100% of fair market value, up to any applicable statutory limit  \$0.00  100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(2)  11 U.S.C. § 522(d)(5)
Brief description:  Couch - \$150 Loveseat - \$75 TV cabinet - \$100 Coffee table - \$25 End tables - \$25 Kitchen table and chairs - \$200 Washing machine - \$150 Dryer - \$100 Cookware - \$50 Dishes - \$50 Bed - \$275 Dresser - \$50 Lamps and accessories - \$25  Line from Schedule A/B:  6	\$1,275.00	\$1,275.00  100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)

Document Page 12 of 39 Debtor 1 Case number (if known) 23-40073 Michael **James** Hardy First Name Middle Name Last Name Part 2: Additional Page 3. Are you claiming a homestead exemption of more than \$189,050? (Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.) **√** No ☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? ☐ No Yes

Case 23-40073 Doc 9 Filed 01/19/23 Entered 01/19/23 10:00:34 Desc Main

## Case 23-40073 Doc 9 Filed 01/19/23 Entered 01/19/23 10:00:34 Desc Main Document Page 13 of 39

Debtor 1 Michael James Hardy Case number (if known) 23-40073

First Name Middle Name Last Name

Part 2: Additional Page			
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption.	
Brief description:		<b>⊴</b> \$550.00	11 II C C & E22(d)(2)
Televisions (2) - \$200 DVD player - \$50 Computer - \$150 Cell phone - \$150	\$550.00	100% of fair market value, up	11 U.S.C. § 522(d)(3)
Line from Schedule A/B:7		to any applicable statutory limit	
Brief description:	****	<b>⊴</b> \$100.00	11 U.S.C. § 522(d)(5)
Golf clubs	\$100.00	100% of fair market value, up	
Line from Schedule A/B: 9		to any applicable statutory limit	
Brief description:		<b>✓</b> \$300.00	44 11 0 0 6 500(4)(0)
Clothing and shoes	\$300.00	\$300.00 100% of fair market value, up	11 U.S.C. § 522(d)(3)
Line from Schedule A/B:11		to any applicable statutory limit	
Brief description:		_ <b>6</b>	
Glasses	\$50.00	\$50.00	11 U.S.C. § 522(d)(4)
Line from Schedule A/B: 12		100% of fair market value, up to any applicable statutory limit	
Brief description:		<b>√</b> \$5.00	
Cash	\$5.00		11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 16		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		<b>√</b> \$730.00	
Wells Fargo checking account no. 0234	\$730.00		11 U.S.C. § 522(d)(5)
Checking account		☐ 100% of fair market value, up to any applicable statutory limit	
Line from Schedule A/B: 17			
Brief description:		<b>√</b> \$0.07	11 U.S.C. § 522(d)(5)
Wells Fargo savings account no. 9050 Savings account	\$0.07	100% of fair market value, up	11 0.0.0. 3 022(0)(0)
Line from Schedule A/B:17		to any applicable statutory limit	
Brief description:		<b>√</b> \$51.00	44 11 0 0 0 5 500(-1)/5
Wells Fargo checking account no. 1857 Checking account	\$51.00	100% of fair market value, up	11 U.S.C. § 522(d)(5)
Line from Schedule A/B:17		to any applicable statutory limit	

# Case 23-40073 Doc 9 Filed 01/19/23 Entered 01/19/23 10:00:34 Desc Main Document Page 14 of 39

Debtor 1	Michael First Name	James Middle Name	Hardy Last Name	Case numb	eer (if known) 23-40073	
Part 2: Additi	ional Page					
Brief description of the property and line on Schedule A/B that lists this property			Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption	
			Copy the value from Schedule A/B	Check only one box for each exemption.		
Brief description:			¢22.040.27	<b>☑</b> \$22,840.37	11 U.S.C. § 522(d)(12)	
TRS Line from Schedule A/B:	21		\$22,840.37	100% of fair market value, up to any applicable statutory limit		

## Case 23-40073 Doc 9 Filed 01/19/23 Entered 01/19/23 10:00:34 Desc Main Document Page 15 of 39

				Document	Page 15 of 39	)		
Fill	in this information to	o identify your case:						
De	ebtor 1	Michael First Name	James Middle Name	Hardy Last Name	_			
	ebtor 2 pouse, if filing)	First Name	Middle Name	Last Name				
Ur	nited States Bankrup	otcy Court for the:		Eastern District of	Texas			
	ase number known)	23-40073					Check if amended	
Off	ficial Form	106D						
Sc	hedule D	: Creditors	s Who H	Have Clair	ns Secured	by Prope	erty	12/15
1. Do	No. Check this bo Yes. Fill in all of the List All Sec	e claims secured by	m to the court	with your other sche	dules. You have nothing	g else to report on th	is form.	Column C
2.	separately for each	n claim. If more than As much as possible	one creditor ha	as a particular claim,	list the other	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion
2.1	Capital One Auto	Finance		the property that s	ecures the claim:	\$4,223.00	\$6,700.00	\$0.00
	PO Box 660068  Number Stree  Sacramento, CA 9  City		— <u>[</u>	a Sorento  date you file, the clai	<b>m is:</b> Check all that			
	Who owes the deb		☐ Contir	· ·				
	Debtor 2 only		Dispu					
	Debtor 1 and De	•	Nature of	f lien. Check all that	apply.			
	At least one of tanother	the debtors and		reement you made ( ured car loan)	such as mortgage			
	Check if this cla		☐ Statut lien)	ory lien (such as tax	lien, mechanic's			

Date debt was incurred

5/1/2018

☐ Judgment lien from a lawsuit

Add the dollar value of your entries in Column A on this page. Write that number here:

Other (including a right to offset)

Last 4 digits of account number 1 0 0 1

\$4,223.00

# Case 23-40073 Doc 9 Filed 01/19/23 Entered 01/19/23 10:00:34 Desc Main Document Page 16 of 39

Debtor 1 <u>Michael</u> Jame		James	Hardy		Case number (if known) 23-40073			
	First Name	Middle Name	Last Name					
Part 1:	Additional Page After listing any e 2.3, followed by 2		ge, number them beginning v	vith	nt of claim deduct the of	Column B Value of collateral that supports this claim	Column C Unsecured portion If any	
2.2		Descri	be the property that secures the o	laim:			_	
Creditor	's Name							
Number	Number Street  City State ZIP Code  Who owes the debt? Check one.		ne date you file, the claim is: Check	all that				
1			ntingent					
	otor 1 only		iquidated					
Deb	otor 2 only	Disp	puted					
Deb	otor 1 and Debtor 2 only		Nature of lien. Check all that apply.					
At le	east one of the debtors ther		agreement you made (such as mo ecured car loan)	rtgage				
	eck if this claim relates	to a Star	tutory lien (such as tax lien, mecha )	nic's				
	ebt was incurred		gment lien from a lawsuit er (including a right to offset)					
		Last 4	digits of account number	<u> </u>				
Add th	ne dollar value of your	entries in Column A	on this page. Write that number h	ere:	\$(	0.00		
If this here:	is the last page of you	form, add the dollar	value totals from all pages. Write	that number	\$4,223	3.00		

Case 23-40073 Doc 9 Filed 01/19/23 Entered 01/19/23 10:00:34 Desc Main

	0030 20 40010	D00 3 1	Document	Page 17 of 3	713723 10.0 39	70.04 D	JJC WIGH		
Fill in this informa	ation to identify your case:				1				
Debtor 1	Michael First Name	James Middle Name	Hardy Last Name						
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name						
United States B	sankruptcy Court for the:		Eastern District of	Texas					
Case number (if known)	23-40073						Check if amended		
Official Fo	rm 106E/F								
Schedule	======================================	ors Who	Have Un	secured C	laims				12/15
1. Do any cred	Ill of Your PRIORITY Laboration litters have priority unsecute Part 2.								
claim listed, amounts. As fill out the Co	our priority unsecured claidentify what type of claims much as possible, list the ontinuation Page of Part 1 anation of each type of cla	it is. If a claim claims in alpha . If more than o	has both priority and abetical order accord ne creditor holds a p	I nonpriority amounts ling to the creditor's nearticular claim, list th	, list that claim he name. If you have e other creditors	ere and show e more than tw	both priority	and nonp	oriority
							Priority amount	Nonprio amount	
Priority Crec PO Box 7 Number Philadelp City Who incur Debto	Revenue Service ditor's Name 7346 Street Dhia, PA 19101 State rred the debt? Check one. r 1 only r 2 only r 1 and Debtor 2 only	ZIP Code	When was the d As of the date yeapply. Contingent Unliquidated Disputed Type of PRIORIT Domestic su	ebt incurred? 2021 ou file, the claim is: (  TY unsecured claim: pport obligations	Check all that	\$1,220.00	<u>\$1,220.</u>	00	\$0.00
	i i and Debiol 2 only		√1 <b>-</b>	and a feet and the second at the feet and a					

☐ At least one of the debtors and another

Is the claim subject to offset?

**☑** No ☐ Yes

☐ Check if this claim is for a community debt

Taxes and certain other debts you owe the

Other. Specify

government
Claims for death or personal injury while you were intoxicated

Case 23-40073 Doc 9 Filed 01/19/23 Entered 01/19/23 10:00:34 Desc Main Document Page 18 of 39

When was the debt incurred?   01/01/2019   As of the date you file, the claim is: Check all that apply.   Contingent   Uniquidated	Debto	or 1 <u>Michael</u> First Name	James Middle Name	Hardy Last Name	Case number (if known) 23-40073
No. You have nothing to report in this part. Submit this form to the court with your other schedules.   Yes.	Part	2: List All of Your NO	NPRIORITY Unsecu	red Claims	
4. List all of your compriority unsecured claims in the alphabetical action of the creditor who holds each claim. If a crudic has more than one nonpriority unsecured claims (as the claim based, benity what type of claim is 1.0.0 not list claims and priority included in Part 1.1 frome than one creditor holds a particular claim, list the other creditors in Part 3.1 flyou have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.    Copital One	_	_	· · · · · · · · · · · · · · · · · · ·	-	n your other schedules.
unsecured claim, list the creditor separately for each claim. For each claim lists do, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Community of Part 2.    Capital One		· ·	, ,		• • • • • • • • • • • • • • • • • • • •
Last 4 digits of account number 4319   \$715.00	L 1	unsecured claim, list the cre 1. If more than one creditor	editor separately for each holds a particular claim,	claim. For each claim listed	d, identify what type of claim it is. Do not list claims already included in Part
Monproting Creditor's Name   Attr: Bankruptcy   At least one of the debt of Sant Labe (Check If this claim is for a community debt is the claim subject to offset?   Size   Zip Code   Disputed   Size   Contingent   Check If this claim is for a community debt is the claim subject to offset?   Size   Zip Code   Disputed   Claim Size   Claim S					Total claim
Attr.: Bankruptcy PO Box 39285 Number Street State ZiP Code Who incurred the debt? Check one. Salt Lake City. UT 84130-9285 Chy Who incurred the debt? Check one. Debtor 1 only Debtor 2 only A least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset?  No Yes  12. CashNet USA Nopromy Creditors Name Namber Street Chicago, IL 60604 City No incurred the debtors and another Check if this claim is for a community debt is the claim subject to offset?  No Debtor 1 only Debtor 2 only No State ZiP Code Who incurred the debtors and another Check if this claim is for a community debt is the claim subject to offset? No No Yes  1.33 Easy Pay/Duvera Collections Nonpromy Creditors Name Artr.: Bankruptcy PD Box 2549 Who incurred the debt? Check one. Debtor 2 only Who incurred the debt? Check one. Debtor 3 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 6 only Debtor 6 only Debtor 1 only Debtor 1 only Debtor 5 only Debtor 6 only Debtor 7 only Debtor 6 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 8 only Debtor 8 only Debtor 9 on	4.1	Capital One		Last 4 digits	s of account number <u>4319</u> \$715.00
PO Box 30285   Number   Size				When was t	he debt incurred? 01/01/2019
Number   Street   Salt Lake City UT 84130-0285   Disputed   Disput				_	
Sait Lake City, U 84139-0285 City State ZIP Code Who incurred the debt? Check one.  \$\frac{1}{2}\text{ Debtor 1 only} \\				_	
Who incurred the debt? Check one.    Debtor 1 and Debtor 2 conly   Debtor 1 conly   State   ZIP Code   Debtor 2 conly   Debtor 2 conly   Debtor 1 conly   State   ZIP Code   Debtor 2 conly   Debtor 1 conly   State   ZIP Code   Debtor 2 conly   Debtor 2 conly   Debtor 1 conly   Debtor 2 conly   Debtor 2 conly   Debtor 1 conly   Debtor 2 conly   Debtor 2 conly   Debtor 1 conly   Debtor 2 conly   Debtor 2 conly   Debtor 1 conly   Debtor 1 conly   Debtor 2 conly   Debtor 1 conly   Debtor 2 conly   Debtor 1 conly   Debtor 2 conly   Debtor 2 conly   Debtor 1 conly   Debtor 2 conly   Debtor			)-0285	·	
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset?    CashNet USA Numpriority Creditor's Name   Yes   Chicago, IL 509694   City   State   ZiP Code   Debtor 1 and Debtor 2 only   Debtor 3 Name   Attr. Bankruptcy   Po Box 2549   Nongriority Creditor's Name   Attr. Bankruptcy   State   ZiP Code   Debtor 2 only   Debtor 1 and Debtor 2 only   Debtor 1 only   Debtor 2 only   Debtor 3 only   Debtor 4 only   State   ZiP Code   Debtor 2 only   Debtor 3 only   Debtor 4 only   Debtor 4 only   Debtor 4 only   Debtor 5 only   Debtor 5 only   Debtor 5 only   Debtor 6 only   Debtor 6 only   Debtor 6 only   Debtor 6 only   Debtor 7 only   Debtor 8 only   Debtor 9 only   Debtor 1 only   Debtor 2 only   Debtor 1 only   Debtor 1 only   Debtor 2 only   Debtor 1 only   Debtor 2 only   Debtor 1 only   Debtor 1 only   Debtor 2 only   Debtor 1 on		City	State ZIP Code	•	
Debtor 2 only			Check one.	<u></u> '	
Debtor 1 and Debtor 2 only		_			
At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset?  I No Yes  Last 4 digits of account number 6984 Nonpriority Creditor's Name Nonpri		_	) anh		
Check if this claim is for a community debt is the claim subject to offset?   Softman debts		_	•		
Is the claim subject to offset?    SahNet USA				<b>⊸6</b>	
Acceptable   Yes			•	Outlot.	
CashNet USA   Nonpriority Creditor's Name   175 W. Jackson Bivd. Suite 1000   Number   Street   Chicago, IL 60604   City   State   ZIP Code   Who incurred the debt? Check one.   Who incurred the debt? Check one.   Who incurred the debtor 2 only   Debtor 1 and Debtor 2 only   Pes   Nonpriority Creditor's Name   Attn: Bankruptcy   Po Box 2549   Number   Street   Carlsbad, CA 92018-2549   City   Carlsbad, CA 92018-2549   City   Carlsbad, CA 92018-2549   Debtor 1 and Debtor 2 only   Debtor 1 and Debtor 2 only   Carlsbad, CA 92018-2549   Debtor 1 and Debtor 2 only   Debtor 1 and Debtor 2 only   Carlsbad, CA 92018-2549   Debtor 1 and Debtor 2 only   Carlsbad, CA 92018-2549   Debtor 1 and Debtor 2 only   Debtor 1 bedtor 3 manually debt   Street   Check if this claim is for a community debt   Street   Check if this claim is for a community debt   Street   Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this claim is for a community deb					
Castinet Of Street   Chicago, IL 50604   City   State   ZIP Code   City   Chicago, IL 50604   City   Check one.   Check if this claim is for a community debt   St the claim subject to offset?   Check if this claim is for a community debt   St the Claim subject to offset?   Carlsbad, CA 92018-2549   City   State   ZIP Code   Check if this claim is for a community debt   St the claim subject to offset?   Check if this claim is for a community debt   Carlsbad, CA 92018-2549   City   State   ZIP Code   Check if this claim is for a community debt   Check if this claim is for a community debt   St the claim subject to offset?   Check if this claim is for a community debt   St the claim subject to offset?   Check if this claim is for a community debt   St the claim subject to offset?   Check if this claim is for a community debt   St the claim subject to offset?   Check if this claim is for a community debt   St the claim subject to offset?   Check if this claim is for a community debt   St the claim subject to offset?   Check if this claim is for a community debt   St the claim subject to offset?   Check if this claim is for a community debt   St the claim subject to offset?   Check if this claim is for a community debt   St the claim subject to offset?   Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this claim is for a community		☐ Yes			
Nonpriority Creditor's Name  175 W. Jackson Blvd. Suite 1000 Number Street Chicago, IL 60604 City State ZIP Code Who incurred the debt? Check one.  1 Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 sharingtox As of the date you file, the claim is: Check all that apply. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 3 community debt Is the claim subject to offset?  2 Student loans Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans is: Check all that apply. Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 3 community debt Street Chicago, IL 60604 City State ZIP Code Who incurred the debt? Check one.  1 Student loans Debts to pension or profit-sharing plans, and other divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other debts Other. Specify InstallmentSalesContract	4.2	CashNet USA		Last 4 digits	s of account number 6984 \$236.00
As of the date you file, the claim is: Check all that apply.    Chicago, IL 60604					
Contingent   Chicago, IL 60604   City			uite 1000		
Unliquidated   Disputed   Dispu				_	
Type of NONPRIORITY unsecured claim:   Debtor 1 and Debtor 2 only			State ZIP Code	Unliquid	dated
Debtor 2 only		Who incurred the debt?	Check one.	☐ Dispute	d
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ☑ No □ Yes  4.3 Easy Pay/Duvera Collections Nonpriority Creditor's Name Attn: Bankruptcy PO Box 2549 Number Street Carlsbad, CA 92018-2549 □ Debtor 1 only □ Debtor 1 only □ Debtor 1 only □ Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ☑ No  Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify  When was the debt incurred? 10/22/2022 As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed  Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify InstallmentSalesContract		✓ Debtor 1 only		· · · · · · · · · · · · · · · · · · ·	
divorce that you did not report as priority claims    At least one of the debtors and another   Check if this claim is for a community debt		Debtor 2 only			
□ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset?  1.3 Easy Pay/Duvera Collections Nonpriority Creditor's Name Attn: Bankruptcy PO Box 2549 Number Street Carlsbad, CA 92018-2549 City State ZIP Code Who incurred the debt? Check one.  1.3 Debtor 1 only □ Debtor 2 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset?  1. Debtor 1 onfset?  2. Debtor 1 only □ Debtor 2 only □ Debtor 3 one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset?  2. Debtor 1 onfset?  3. Debtor 2 only □ Debtor 3 one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset?		_	•	→ Obligati divorce	ons arising out of a separation agreement or that you did not report as priority claims
Similar debts   Similar debts   Other. Specify   Other.					
State   Stat			•	_ <b>/</b>	
Yes   Say Pay/Duvera Collections   Last 4 digits of account number 2809   \$454.00			'set?	Other. S	Specify
Last 4 digits of account number   2809   \$454.00     Nonpriority Creditor's Name   When was the debt incurred?   10/22/2022     Attn: Bankruptcy   As of the date you file, the claim is: Check all that apply.   Contingent     Carlsbad, CA 92018-2549   Unliquidated     City   State   ZIP Code   Disputed					
Nonpriority Creditor's Name Attn: Bankruptcy  PO Box 2549 Number Street Carlsbad, CA 92018-2549 City State ZIP Code  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No  When was the debt incurred? 10/22/2022 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify InstallmentSalesContract	12	Face Pau/Denser Called	41	المعالم	s454.00
As of the date you file, the claim is: Check all that apply.    Contingent	4.3		tions		S of account number 2009
Contingent		Attn: Bankruptcy			
Carlsbad, CA 92018-2549 City State ZIP Code  Who incurred the debt? Check one.  ✓ Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt  Is the claim subject to offset?  No  Unliquidated  Disputed  Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify  InstallmentSalesContract		PO Box 2549			• 113
Who incurred the debt? Check one.  ✓ Debtor 1 only  Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt  Is the claim subject to offset?  Disputed  Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify  InstallmentSalesContract			10	-	
Who incurred the debt? Check one.  ✓ Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt  Is the claim subject to offset?  No  Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify  InstallmentSalesContract				Dispute	d
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt  Is the claim subject to offset? □ No □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ○ Other. Specify InstallmentSalesContract		•		Type of NO	NPRIORITY unsecured claim:
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt  Is the claim subject to offset? □ No  divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify InstallmentSalesContract		✓ Debtor 1 only		_	
Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt  Is the claim subject to offset?  No  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify InstallmentSalesContract		Debtor 2 only		☐ Obligati	ons arising out of a separation agreement or
At least one of the debtors and another  Check if this claim is for a community debt  Is the claim subject to offset?  No		_	•		
Is the claim subject to offset?  InstallmentSalesContract  InstallmentSalesContract				similar o	debts
☑ No			•	— Other. C	
		•	set?	instalin	ienioalescontract
		Yes			

Case 23-40073 Doc 9 Filed 01/19/23 Entered 01/19/23 10:00:34 Document

Page 19 of 39 Case number (if known) 23-40073 Debtor 1 Hardy Michael James First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. Total claim \$1,169.00 4.4 Last 4 digits of account number 1210 Fig Loans Nonpriority Creditor's Name When was the debt incurred? 11/01/2021 Attn: Bankruptcy As of the date you file, the claim is: Check all that apply. 2245 Texas Dr Contingent Number Street Unliquidated Sugar Land, TX 77479 ZIP Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: **☑** Debtor 1 only □ Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other ■ At least one of the debtors and another similar debts Check if this claim is for a community debt  $\sqrt{}$ Other. Specify Unsecured Is the claim subject to offset? **☑** No ☐ Yes \$603.00 **First Premier Bank** Last 4 digits of account number 0693 Nonpriority Creditor's Name When was the debt incurred? 12/01/2021 PO Box 5529 As of the date you file, the claim is: Check all that apply. Number Street Contingent Sioux Falls, SD 57117 State ZIP Code Unliquidated Who incurred the debt? Check one. Disputed **☑** Debtor 1 only Type of NONPRIORITY unsecured claim: ☐ Debtor 2 only ■ Student loans ☐ Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other Check if this claim is for a community debt similar debts Is the claim subject to offset?  $\sqrt{}$ Other. Specify **☑** No CreditCard Yes \$848.00 **Fortiva** Last 4 digits of account number 7908 Nonpriority Creditor's Name When was the debt incurred? 07/01/2019 Attn: Bankruptcy As of the date you file, the claim is: Check all that apply. PO Box 105555 Contingent Number Unliquidated Atlanta, GA 30348-5555 ZIP Code State Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: **☑** Debtor 1 only □ Student loans ☐ Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other At least one of the debtors and another similar debts Check if this claim is for a community debt

**☑** No ☐ Yes

Is the claim subject to offset?

Other. Specify CreditCard

Case 23-40073 Doc 9 Filed 01/19/23 Entered 01/19/23 10:00:34 Desc Main Document Page 20 of 39

Debtor 1	Michael	James	Hardy	Case number (if known)	23-40073
	First Name	Middle Name	Last Name		

Part	2: Your NONPRIORITY Unsecured Claims - Con-	tinuation Page	
Afte	r listing any entries on this page, number them beginning	with 4.5, followed by 4.6, and so forth.	Total claim
4.7	National Credit Adjusters, LLC  Nonpriority Creditor's Name  327 West 4th Avenue  PO Box 3023  Number Street  Hutchinson, KS 67504  City State ZIP Code  Who incurred the debt? Check one.  Debtor 1 only  Debtor 2 only  Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt  Is the claim subject to offset?  No  Yes	When was the debt incurred? 12/01/2021  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify FactoringCompanyAccount	<u>\$423.00</u>
4.8	Nonpriority Creditor's Name  Attn: Bankruptcy  P.O. Box 9500  Number Street  Wilkes-Barre, PA 18773-9500  City State ZIP Code  Who incurred the debt? Check one.  Debtor 1 only  Debtor 2 only  Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt  Is the claim subject to offset?  No  Yes	Last 4 digits of account number 0331  When was the debt incurred? 03/01/2010  As of the date you file, the claim is: Check all that apply.  □ Contingent □ Unliquidated □ Disputed  Type of NONPRIORITY unsecured claim: ☑ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Educational	<u>\$10,751.00</u>
4.9	Navient Solutions Inc Nonpriority Creditor's Name  Attn: Bankruptcy  P.O. Box 9500  Number Street  Wilkes-Barre, PA 18773-9500  City State ZIP Code  Who incurred the debt? Check one.  1 Debtor 1 only  Debtor 2 only  Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt  Is the claim subject to offset?  No  Yes	Last 4 digits of account number 0116  When was the debt incurred? 01/01/2014  As of the date you file, the claim is: Check all that apply.  □ Contingent □ Unliquidated □ Disputed  Type of NONPRIORITY unsecured claim: ☑ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Educational	\$7,458.00

Case 23-40073 Doc 9 Filed 01/19/23 Entered 01/19/23 10:00:34 Desc Main Document Page 21 of 39

Debtor 1	Michael	James	Hardy	Case number (if known)	23-40073
	First Name	Middle Name	Last Name		

Part	Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page					
Afte	r listing any entries on this page, number them beginning	with 4.5, followed by 4.6, and so forth.	Total claim			
4.10	Navient Solutions Inc Nonpriority Creditor's Name  Attn: Bankruptcy  P.O. Box 9500  Number Street  Wilkes-Barre, PA 18773-9500  City State ZIP Code  Who incurred the debt? Check one.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt  Is the claim subject to offset?  No  Yes	Last 4 digits of account number 0524  When was the debt incurred? 05/01/2018  As of the date you file, the claim is: Check all that apply.  □ Contingent □ Unliquidated □ Disputed  Type of NONPRIORITY unsecured claim: ☑ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Educational	\$6,373.00			
4.11	Navient Solutions Inc Nonpriority Creditor's Name  Attn: Bankruptcy  P.O. Box 9500  Number Street  Wilkes-Barre, PA 18773-9500  City State ZIP Code  Who incurred the debt? Check one.  Debtor 1 only  Debtor 2 only  Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt  Is the claim subject to offset?  No  Yes	Last 4 digits of account number 0523  When was the debt incurred? 05/01/2019  As of the date you file, the claim is: Check all that apply.  □ Contingent □ Unliquidated □ Disputed  Type of NONPRIORITY unsecured claim:  ☑ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Educational	<u>\$6,122.00</u>			
4.12	Navient Solutions Inc Nonpriority Creditor's Name  Attn: Bankruptcy  P.O. Box 9500  Number Street  Wilkes-Barre, PA 18773-9500  City State ZIP Code  Who incurred the debt? Check one.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt  Is the claim subject to offset?  No  Yes	Last 4 digits of account number 0521  When was the debt incurred? 05/01/2020  As of the date you file, the claim is: Check all that apply.  □ Contingent □ Unliquidated □ Disputed  Type of NONPRIORITY unsecured claim:  ☑ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Educational	\$6,000.00			

	Case 23-40	0073 Doc 9	Filed 01/19/23 Document	Entered 01/19/23 10:00:34 Desc Main Page 22 of 39
Debtor 1	Michael	James	Hardy	Case number (if known) 23-40073
	First Name	Middle Name	Last Name	
Part 2: You	r NONPRIORITY	Unsecured Clain	ns - Continuation Pa	ge
After listing a	any entries on this p	page, number them b	peginning with 4.5, follo	wed by 4.6, and so forth. Total claim
Nonprior Attn: E P.O. B Number Wilkes City Who in	it Solutions Inc ity Creditor's Name Bankruptcy ox 9500 Street s-Barre, PA 18773-9 curred the debt? Chotor 1 only	State ZIP Code	When As of C C D Type of S S	digits of account number 0331 \$4,860.00  was the debt incurred? 03/01/2010  the date you file, the claim is: Check all that apply.  ontingent  nliquidated  sputed  of NONPRIORITY unsecured claim:  udent loans
☐ Del ☐ At I ☐ Ch	btor 2 only btor 1 and Debtor 2 only east one of the debtor eck if this claim is for laim subject to offse	tors and another or a community deb	di □ D si t □ O	bligations arising out of a separation agreement or vorce that you did not report as priority claims ebts to pension or profit-sharing plans, and other milar debts ther. Specify ducational

Contingent

Unliquidated

✓ Student loans

similar debts

Other. Specify

Educational

Contingent

Unliquidated

✓ Student loans

similar debts

Other. Specify

Educational

Disputed

Disputed

Last 4 digits of account number 0521

Type of NONPRIORITY unsecured claim:

Last 4 digits of account number 0116

Type of NONPRIORITY unsecured claim:

When was the debt incurred? 01/01/2014

As of the date you file, the claim is: Check all that apply.

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other

When was the debt incurred? 05/01/2020

As of the date you file, the claim is: Check all that apply.

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other

✓ No ☐ Yes

☐ Yes

Number

✓ No ☐ Yes

Number

City

4.15

**Navient Solutions Inc** 

Nonpriority Creditor's Name

Wilkes-Barre, PA 18773-9500

☐ Debtor 1 and Debtor 2 only

Is the claim subject to offset?

Street

Who incurred the debt? Check one.

At least one of the debtors and another

☐ Check if this claim is for a community debt

Wilkes-Barre, PA 18773-9500

☐ Debtor 1 and Debtor 2 only

Is the claim subject to offset?

**Navient Solutions Inc** 

Nonpriority Creditor's Name

Attn: Bankruptcy

P.O. Box 9500

**☑** Debtor 1 only

Debtor 2 only

Who incurred the debt? Check one.

At least one of the debtors and another

☐ Check if this claim is for a community debt

ZIP Code

ZIP Code

Attn: Bankruptcy

P.O. Box 9500

**☑** Debtor 1 only

Debtor 2 only

\$4,500.00

\$3,976.00

	Case 23-40	0073 D0C9	Filed 01/19/23	esc Main
Debtor '	1 Michael	James	Hardy Case number (if know	n) <b>23-40073</b>
	First Name	Middle Name	Last Name	
Part 2	: Your NONPRIORITY	Unsecured Claims	- Continuation Page	
After l	isting any entries on this p	page, number them be	inning with 4.5, followed by 4.6, and so forth.	Total claim
	Navient Solutions Inc		Last 4 digits of account number 0729	\$3,817.00
	Nonpriority Creditor's Name		When was the debt incurred? 07/01/2014	
_			As of the date you file, the claim is: Check all that apply.	
-	P.O. Box 9500 Number Street		Contingent	
	Wilkes-Barre, PA 18773-9	9500	Unliquidated	
_	City	State ZIP Code	Disputed	
	Who incurred the debt? Cl	heck one.	Type of NONPRIORITY unsecured claim:	
	✓ Debtor 1 only		☑ Student loans	
[	Debtor 2 only		Obligations arising out of a separation agreement or	
[	Debtor 1 and Debtor 2	only	divorce that you did not report as priority claims	
[	At least one of the deb	tors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
[	Check if this claim is f	or a community debt	Other. Specify	
ı	s the claim subject to offs	set?	Educational	
	<b>√</b> No			
[	☐ Yes			
1.17	Navient Solutions Inc		Last 4 digits of account number 0524	\$3,500.00
	Nonpriority Creditor's Name		When was the debt incurred? 05/01/2018	
_	Attn: Bankruptcy			
	P.O. Box 9500		———— Contingent	
1	Number Street		☐ Unliquidated	
_	Wilkes-Barre, PA 18773-9	9500 State ZIP Code	·	
	∪ny <b>Who incurred the debt?</b> Cl		☐ Disputed	
	Debtor 1 only	HECK OHE.	Type of NONPRIORITY unsecured claim: ☑ Student loans	
,	Debtor 2 only			
,	Debtor 1 and Debtor 2	only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
,		•	Debts to pension or profit-sharing plans, and other	
ſ	At least one of the deb		similar debts	
	☐ Check if this claim is f	•	☐ Other. Specify Educational	
	ls the claim subject to offs ☑ No	et?	Educational	
	Yes			
	Yes			40 500 00
	Navient Solutions Inc		Last 4 digits of account number <u>0523</u>	\$3,500.00
	Nonpriority Creditor's Name		When was the debt incurred? <u>05/01/2019</u>	
_	Attn: Bankruptcy		As of the date you file, the claim is: Check all that apply.	
	P.O. Box 9500 Number Street		Contingent	
_	Wilkes-Barre, PA 18773-9	9500	Unliquidated	
(	City	State ZIP Code	Disputed	
	Who incurred the debt? Cl	heck one.	Type of NONPRIORITY unsecured claim:	
ţ	Debtor 1 only		☑ Student loans	
[	Debtor 2 only		Obligations arising out of a separation agreement or	
[	Debtor 1 and Debtor 2	only	divorce that you did not report as priority claims	
[	At least one of the deb	tors and another	Debts to pension or profit-sharing plans, and other similar debts	

 $\ \square$  Check if this claim is for a community debt

Is the claim subject to offset?

Other. Specify Educational

Case 23-40073 Doc 9 Filed 01/19/23 Entered 01/19/23 10:00:34 Desc Main Document Page 24 of 39

Debtor 1 Michael James Hardy Case number (if known) 23-40073
First Name Middle Name Last Name

Navient Solutions Inc	Last 4 digits of account number <u>0729</u>	\$1,99
Ionpriority Creditor's Name	When was the debt incurred? 07/01/2014	
Attn: Bankruptcy	As of the date you file, the claim is: Check all that apply.	
P.O. Box 9500	Contingent	
lumber Street Wilkes-Barre, PA 18773-9500	☐ Unliquidated	
city State ZIP Code	Disputed	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☑ Student loans	
Debtor 2 only	<ul> <li>Obligations arising out of a separation agreement or</li> </ul>	
Debtor 1 and Debtor 2 only	divorce that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other	
Check if this claim is for a community debt	similar debts	
s the claim subject to offset?	☐ Other. Specify Educational	
No		
Yes		
Navient Solutions Inc	Last 4 digits of account number 0520	\$1,83
onpriority Creditor's Name	When was the debt incurred? 05/01/2021	
Attn: Bankruptcy	As of the date you file, the claim is: Check all that apply.	
P.O. Box 9500	— Contingent	
lumber Street	☐ Unliquidated	
Wilkes-Barre, PA 18773-9500	<del></del> ·	
ity State ZIP Code  Who incurred the debt? Check one.	☐ Disputed	
Debtor 1 only	Type of NONPRIORITY unsecured claim:	
,	☑ Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other	
At least one of the debtors and another	similar debts	
Let Check if this claim is for a community debt	Other. Specify	
s the claim subject to offset?	Educational	
M No		
<b>」</b> Yes		£4.00
Navient Solutions Inc	Last 4 digits of account number <u>0520</u>	\$1,00
Onprionly Creditor's Name Attn: Bankruptcy	When was the debt incurred? 05/01/2021	
P.O. Box 9500	As of the date you file, the claim is: Check all that apply.	
lumber Street	Contingent	
Wilkes-Barre, PA 18773-9500	Unliquidated	
ity State ZIP Code	☐ Disputed	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☑ Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or	
Debtor 1 and Debtor 2 only	divorce that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	Other. Specify	
s the claim subject to offset?	Educational	

Case 23-40073 Doc 9 Filed 01/19/23 Entered 01/19/23 10:00:34 Desc Main Document Page 25 of 39

Debtor 1	Michael	James	Hardy	Case number (if known)	23-40073
	First Name	Middle Name	Last Name		
Part 2: Your N	ONPRIORITY Uns	secured Claims - Co	ontinuation Page		

After	listing any entries on this page, number them beginning w	ith 4.5, followed by 4.6, and so forth.	Total claim
4.22	Resurgent Capital Services	Last 4 digits of account number 2600	\$664.00
	Nonpriority Creditor's Name	When was the debt incurred? 02/01/2019	
	Attn: Bankruptcy	As of the date you file, the claim is: Check all that apply.	
	PO Box 10497	- ☐ Contingent	
	Number Street	☐ Unliquidated	
	Greenville, SC 29603 City State ZIP Code	Disputed	
	Who incurred the debt? Check one.	•	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:  ☐ Student loans	
	Debtor 2 only		
	_	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other	
	At least one of the debtors and another	similar debts	
	☐ Check if this claim is for a community debt	Other. Specify	
	Is the claim subject to offset?  ✓ No	FactoringCompanyAccount	
	— ···		
	Yes		
4.23	Resurgent Capital Services	Last 4 digits of account number 9027	<u>\$661.00</u>
	Nonpriority Creditor's Name	When was the debt incurred? 06/01/2020	
	Attn: Bankruptcy	<ul> <li>As of the date you file, the claim is: Check all that apply.</li> </ul>	
	PO Box 10497 Number Street	Contingent	
	Greenville, SC 29603	☐ Unliquidated	
	City State ZIP Code	_ Disputed	
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
	☑ Debtor 1 only	☐ Student loans	
	Debtor 2 only	<ul> <li>Obligations arising out of a separation agreement or</li> </ul>	
	Debtor 1 and Debtor 2 only	divorce that you did not report as priority claims	
	☐ At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Check if this claim is for a community debt	Other. Specify	
	Is the claim subject to offset?	FactoringCompanyAccount	
	☑ No		
	☐ Yes		
4.24	Texas Workforce Commission	Last 4 digits of account number 44-3	\$6,850.00
	Nonpriority Creditor's Name	When was the debt incurred? 2021	
	PO Box 149352	As of the date you file, the claim is: Check all that apply.	
	Number Street	Contingent	
	Austin, TX 78714  City State ZIP Code	Unliquidated	
	Who incurred the debt? Check one.	☐ Disputed	
	☑ Debtor 1 only	•	
	Debtor 2 only	Type of NONPRIORITY unsecured claim: ☐ Student loans	
	Debtor 1 and Debtor 2 only		
	,	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other	
	Check if this claim is for a community debt	similar debts	
	Is the claim subject to offset?	☑ Other. Specify	
	<b>☑</b> No		
	☐ Yes		

Case 23-40073 Doc 9 Filed 01/19/23 Entered 01/19/23 10:00:34 Desc Main Document Page 26 of 39

Debtor 1 Hardy Case number (if known) 23-40073 Michael **James** Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. Total claim \$6,850.00 **Texas Workforce Commission** Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2020 PO Box 149352 As of the date you file, the claim is: Check all that apply. Number Street Contingent Austin, TX 78714 State ZIP Code Unliquidated Who incurred the debt? Check one. Disputed **☑** Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other ☐ Check if this claim is for a community debt similar debts Is the claim subject to offset? Other. Specify **☑** No ☐ Yes \$723.00 4.26 Velocity Investments, LIc Last 4 digits of account number 6826 Nonpriority Creditor's Name When was the debt incurred? 08/01/2020 Attn: Bankruptcy Attn: Bankruptcy As of the date you file, the claim is: Check all that apply. 1800 Route 34N, Suite 305 Contingent Number Street Unliquidated Wall, NJ 07719 State ZIP Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: **☑** Debtor 1 only Student loans ☐ Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other At least one of the debtors and another similar debts Check if this claim is for a community debt Other. Specify **FactoringCompanyAccount** Is the claim subject to offset?

☑ No ☐ Yes Case 23-40073 Doc 9 Filed 01/19/23 Entered 01/19/23 10:00:34 Desc Maii Document Page 27 of 39

Debtor 1 Michael James Hardy Case number (if known) 23-40073

Last Name

First Name

Part 3:

Middle Name

List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. **Cks Prime Investments** On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.26 of (Check one): Part 1: Creditors with Priority Unsecured Claims c/o Javitch Block LLC Part 2: Creditors with Nonpriority Unsecured Claims 275 W Campbell Rd # 312 Street Last 4 digits of account number -Richardson, TX 75080-3601 State ZIP Code On which entry in Part 1 or Part 2 did you list the original creditor? **Credit One Bank** Line **4.23** of (*Check one*): Part 1: Creditors with Priority Unsecured Claims **ATTN: Bankruptcy Department** Part 2: Creditors with Nonpriority Unsecured Claims PO Box 98873 Number Last 4 digits of account number . Las Vegas, NV 89193 City ZIP Code On which entry in Part 1 or Part 2 did you list the original creditor? **Genesis FS Card Services** Name Line 4.26 of (Check one): Part 1: Creditors with Priority Unsecured Claims PO Box 4477 Number Part 2: Creditors with Nonpriority Unsecured Claims Street Beaverton, OR 97076 ZIP Code Last 4 digits of account number \_ On which entry in Part 1 or Part 2 did you list the original creditor? LTD Acquisitions Line 4.7 of (Check one): Part 1: Creditors with Priority Unsecured Claims 3200 Wilcrest Drive Number Part 2: Creditors with Nonpriority Unsecured Claims Houston, TX 77042 Last 4 digits of account number \_ State 7IP Code LVNV Funding LLC On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.1 of (Check one): Part 1: Creditors with Priority Unsecured Claims P.O. Box 98875 Part 2: Creditors with Nonpriority Unsecured Claims Number Las Vegas, NV 89193 Last 4 digits of account number . ZIP Code LVNV Funding LLC On which entry in Part 1 or Part 2 did you list the original creditor? Name Line 4.23 of (Check one): Part 1: Creditors with Priority Unsecured Claims P.O. Box 98875 Number Part 2: Creditors with Nonpriority Unsecured Claims Las Vegas, NV 89193 State ZIP Code Last 4 digits of account number \_ The Bank of Missouri On which entry in Part 1 or Part 2 did you list the original creditor? Name Line 4.7 of (Check one): Line Part 1: Creditors with Priority Unsecured Claims 372 S. Kings Highway Part 2: Creditors with Nonpriority Unsecured Claims Number Cape Girardeau, MO 63703 City State ZIP Code Last 4 digits of account number -On which entry in Part 1 or Part 2 did you list the original creditor? Name of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Number Street Last 4 digits of account number -City State ZIP Code

Case 23-40073 Doc 9 Filed 01/19/23 Entered 01/19/23 10:00:34 Desc Main Document Page 28 of 39

Debtor 1 Michael James Hardy Case number (if known) 23-40073

Last Name

First Name

Middle Name

Part 4: Add the Amounts for Each Type of Unsecured Claim 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claim** 6a. Domestic support obligations 6a. \$0.00 **Total claims** from Part 1 6b. Taxes and certain other debts you owe the 6b. \$1,220.00 government 6c. Claims for death or personal injury while you \$0.00 6c. were intoxicated 6d. Other. Add all other priority unsecured claims. \$0.00 6d. Write that amount here. 6e. Total. Add lines 6a through 6d. 6e. \$1,220.00 **Total claim** 6f. Student loans 6f. \$65,682.00 **Total claims** from Part 2 6g. Obligations arising out of a separation \$0.00 6g. agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and \$0.00 6h. other similar debts 6i. Other. Add all other nonpriority unsecured \$20,196.00 claims. Write that amount here. 6j. Total. Add lines 6f through 6i. 6j. \$85,878.00

Case 23-40073 Doc 9 Filed 01/19/23 Entered 01/19/23 10:00:34 Desc Main Document Page 29 of 39

Fill in this information	Fill in this information to identify your case:					
Debtor 1	Michael	James	Hardy			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankr	ruptcy Court for the:		Eastern District of Texas			
Case number (if known)	23-40073					

#### Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or o	company with who	om you ha	ve the contract or lease	State what the contract or lease is for
2.1	Number Mckinney	Kinney in McKinney Pkwy Street , TX 75070			Residential Lease Contract to be ASSUMED
2.2	City		State	ZIP Code	
	Name				
	Number	Street			
	City		State	ZIP Code	
2.3					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.4					
	Name				
	Number	Street			
	City		State	ZIP Code	

Case 23-40073 Doc 9 Filed 01/19/23 Entered 01/19/23 10:00:34 Desc Main Document Page 30 of 39

Fill i	n this information t	to identify your case:				I	
De	btor 1	Michael	James	Hardy			
		First Name	Middle Name	Last Name	_		
-	btor 2						
(Sp	ouse, if filing)	First Name	Middle Name	Last Name			
Un	ited States Bankru	ptcy Court for the:		Eastern District o	f Texas		
	se number nown)	23-40073					Check if this is an amended filing
Off	icial Form	<u>106H</u>					
Sc	hedule H	l: Your Co	debtors				12/15
toget in the	her, both are equa	ally responsible for	supplying correct	t information. If m	ore space is needed,	and accurate as possible. If tw copy the Additional Page, fill i es, write your name and case r	it out, and number the entries
1.		y codebtors? (If you	are filing a joint	case, do not list eit	her spouse as a code	btor.)	
	☑ No ☐ Yes						
2.	Within the last 8 Idaho, Louisiana	, Nevada, New Mex	ico, Puerto Rico,	Texas, Washington	n, and Wisconsin.)	nity property states and territori	es include Arizona, California,
	<b>✓</b> No	opeuce, remier spe	acc, cega. eqa		a at 11.0 111.10 1		
	Yes. In wh	nich community state	or territory did y	ou live?		Fill in the name and current	address of that person.
						_	
	Name						
	Number	Street				_	
	City		State ZIP Cod	le		_	
3.	again as a code	btor only if that pers	son is a guaranto	or or cosigner. Mal	ke sure you have liste	ouse is filing with you. List the d the creditor on Schedule D ( Schedule E/F, or Schedule G to	Official Form 106D),
	Column 1: Your co	odebtor				Column 2: The creditor to who	m you owe the debt
						Check all schedules that app	ly:
3.1						Schedule D, line	
	Name					Schedule E/F, line	

Number

City

Street

State

ZIP Code

☐ Schedule G, line \_\_\_\_\_

Entered 01/10/23 10:00:3/

	Case 23-4007.	3 D0C 9	Document	Page 31 of 39
Fill in this inforn	nation to identify your ca	se:		
Debtor 1	Michael First Name	James Middle Name	Hardy Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	Check if this is:
United States	Bankruptcy Court for the	: <u> </u>	Eastern District of	of Texas  ☐ An amended filing ☐ A supplement showing postpetition
Case number (if known)	23-400	073		chapter 13 income as of the following date
				MM / DD / YYYY
Official Fo	orm 106l			
Schedul	e I: Your Ind	come		12/15
information. If yo	ou are married and not f	filing jointly, and y	our spouse is livin	gether (Debtor 1 and Debtor 2), both are equally responsible for supplying correcting with you, include information about your spouse. If you are separated and your

additional pages, write your name and case number (if known). Answer every question.

Describe Employment 1. Fill in your employment Debtor 1 Debtor 2 or non-filing spouse information. **✓** Employed □ Not Employed If you have more than one job, **Employment status** ☐ Employed ☐ Not Employed attach a separate page with information about additional Occupation **Program Coordinator** employers. Employer's name **UT Southwestern** Include part time, seasonal, or self-employed work. **Employer's address** 6202 Harry Hines Blvd. Occupation may include student Number Street Number Street or homemaker, if it applies. Dallas, TX 75235 City State Zip Code City State Zip Code How long employed there? 7 years 8 months Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll \$6,843.68 \$0.00 deductions.) If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. \$0.00 \$0.00 4. Calculate gross income. Add line 2 + line 3. \$6,843.68 \$0.00

Case 23-40073 Doc 9 Filed 01/19/23 Entered 01/19/23 10:00:34 Desc Main Document Page 32 of 39

Debtor 1 Michael James Hardy Case number (if known) 23-40073

First Name Middle Name Last Name

			For Debtor 1	For Debtor 2 or			
	Copy line 4 here→	4.	\$6,843.68	non-filing spouse \$0.00			
5.	List all payroll deductions:	4.	ψ0,043.00	ψ0.00			
J.	5a. Tax, Medicare, and Social Security deductions	5a.	\$1,103.12	\$0.00			
	5b. Mandatory contributions for retirement plans	5a. 5b.	\$399.99	\$0.00			
	5c. Voluntary contributions for retirement plans	5c.	\$0.00	\$0.00			
	5d. Required repayments of retirement fund loans	5d.	\$0.00	\$0.00			
	5e. Insurance	5e.	\$453.61	\$0.00			
	5f. Domestic support obligations	5f.	\$385.02	\$0.00			
	5g. Union dues	5g.	\$0.00	\$0.00			
	5h. Other deductions. Specify:	5h.	+\$0.00	+\$0.00_			
6.	Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	\$2,341.73	\$0.00			
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$4,501.94	\$0.00			
8.	List all other income regularly received:						
0.	8a. Net income from rental property and from operating a business, profession, or farm						
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	0 -	<b>\$0.00</b>	<b>#0.00</b>			
	monthly net income.	8a.	\$0.00	\$0.00			
	8b. Interest and dividends	8b.	\$0.00	<u>\$0.00</u>			
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive						
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$0.00	\$0.00			
	8d. Unemployment compensation	8d.	\$0.00	<u>\$0.00</u>			
	8e. Social Security	8e.	\$0.00	<u>\$0.00</u>			
	8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.						
	Specify:	8f.	\$0.00	\$0.00			
	8g. Pension or retirement income	8g.	\$0.00	\$0.00			
	8h. Other monthly income. Specify:	8h.	+ \$0.00	+\$0.00			
9.	<b>Add all other income.</b> Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$0.00	\$0.00			
10.	Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse	10.	\$4,501.94	+ \$0.00 = \$4,501.94			
11.	State all other regular contributions to the expenses that you list in Sched	dule J.					
	Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i> .						
	Specify:			11. <b>+</b> \$0.00			
12.	Add the amount in the last column of line 10 to the amount in line 11. The amount on the Summary of Your Assets and Liabilities and Certain Statistical			income. Write that 12. \$4,501.94			
				Combined monthly income			
13.	Do you expect an increase or decrease within the year after you file this fo	orm?		<b>,</b>			
	✓ No.						
	Yes. Explain:						

Case 23-40073 Doc 9 Filed 01/19/23 Entered 01/19/23 10:00:34 Desc Main Document Page 33 of 39

Debtor 1 **Michael** Hardy Case number (if known) 23-40073 <u>James</u> First Name Middle Name Last Name 1. Employment information for Debtor 1 Occupation Employer's name Outback Steakhouse **Employer's address** 9382 State Hwy 121 Number Street Frisco, TX 75035 City State Zip Code How long employed there? 7 years

	Case 23-40073	Doc 9 Filed 01 Docum		ed 01/19/23 10 I of 39	):00:34 De	esc Main
Fill in this info	rmation to identify your case	d				
Debtor 1  Debtor 2 (Spouse, if filin  United States	Michael First Name  9) First Name  Bankruptcy Court for the:	James Hard Middle Name Last N  Middle Name Last N  Eastern I	ame	—   🔲 A su	mended filing	g postpetition chapter 13 lowing date:
Case numbe (if known)		3		MM /	DD / YYYY	
Schedu Be as complete space is neede	orm 106J  IE J: Your Expended accurate as possible do attach another sheet to the cribe Your Household	If two married people are				12/15 orrect information. If more own). Answer every question
[			ses for Separate House	hold of Debtor 2.		
2. <b>Do you ha</b> Do not list Debtor 2.	ave dependents?  Debtor 1 and  te the dependents'	☐ No ☑ Yes. Fill out this information for each dependent	Dependent's re	elationship to	Dependent's age	Does dependent live with you?  No. Yes.  No. Yes.

yourself and your dependents?

Estimate Your Ongoing Monthly Expenses

4d. Homeowner's association or condominium dues

3. Do your expenses include expenses of people other than

**√** No

☐ Yes

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

No. ☐ Yes.☐ No. ☐ Yes.

\$0.00

Include expenses paid for with non-cash government assistance if you know the value of Your expenses such assistance and have included it on Schedule I: Your Income (Official Form 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent 4. \$1,949.00 for the ground or lot. If not included in line 4: 4a. \$0.00 4a. Real estate taxes 4b. \$21.00 4b. Property, homeowner's, or renter's insurance 4c. \$50.00 4c. Home maintenance, repair, and upkeep expenses 4d.

## Case 23-40073 Doc 9 Filed 01/19/23 Entered 01/19/23 10:00:34 Desc Main Document Page 35 of 39

 Debtor 1
 Michael
 James
 Hardy
 Case number (if known) 23-40073

 First Name
 Middle Name
 Last Name

	Yo	our expenses
5. Additional mortgage payments for your residence, such as home equity loans	5. <u> </u>	\$0.00
6. Utilities:		
6a. Electricity, heat, natural gas	6a. <u>—</u>	\$200.00
6b. Water, sewer, garbage collection	6b	\$80.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c	\$140.00
6d. Other. Specify:	6d	\$0.00
7. Food and housekeeping supplies	7.	\$850.00
3. Childcare and children's education costs	8.	\$0.00
). Clothing, laundry, and dry cleaning	9	\$160.00
0. Personal care products and services	10.	\$82.00
11. Medical and dental expenses	11.	\$100.00
<ol> <li>Transportation. Include gas, maintenance, bus or train fare.</li> <li>Do not include car payments.</li> </ol>	12	\$320.00
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$150.00
4. Charitable contributions and religious donations	14.	\$0.00
<ul><li>15. Insurance.</li><li>Do not include insurance deducted from your pay or included in lines 4 or 20.</li></ul>		
15a. Life insurance	15a. —	\$0.00
15b. Health insurance	15b	\$0.00
15c. Vehicle insurance	15c	\$120.00
15d. Other insurance. Specify:	15d	\$0.00
6. <b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20.		
Specify:	16.	\$0.00
7. Installment or lease payments:		
17a. Car payments for Vehicle 1	17a	\$279.00
17b. Car payments for Vehicle 2	17b	\$0.00
17c. Other. Specify:	17c	\$0.00
17d. Other. Specify:	17d.	\$0.00
<ol> <li>Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).</li> </ol>	18.	\$0.00
19. Other payments you make to support others who do not live with you.		
Specify:	19	\$0.00
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	e.	
20a. Mortgages on other property	20a	\$0.00
20b. Real estate taxes	20b	\$0.00
20c. Property, homeowner's, or renter's insurance	20c	\$0.00
20d. Maintenance, repair, and upkeep expenses	20d.	\$0.00
20e. Homeowner's association or condominium dues	20e.	\$0.00

# Case 23-40073 Doc 9 Filed 01/19/23 Entered 01/19/23 10:00:34 Desc Main Document Page 36 of 39

Debtor 1		Michael	James	Hardy	Case number	Case number (if known) 23-40073		
		First Name	Middle Name	Last Name				
21.	Other. Spe	cify:			21.	+\$0.00		
22.	Calculate y	our monthly expe	enses.					
	22a. Add li	nes 4 through 21.			22a.	\$4,501.00		
	22b. Copy	line 22 (monthly ex	xpenses for Debtor 2), i	f any, from Official Form 106J-2	22b.	\$0.00		
	22c. Add line 22a and 22b. The result is your monthly expenses.				22c.	\$4,501.00		
23.	Calculate y	our monthly net i	ncome.					
	23а. Сору	line 12 (your comb	pined monthly income) f	rom Schedule I.	23a.	\$4,501.94		
	23b. Copy	your monthly expe	enses from line 22c abo	ve.	23b.	<b>-</b> \$4,501.00		
	23c. Subtra	act your monthly ex	xpenses from your mon	thly income.				
	The re	esult is your month	nly net income.		23c.	\$0.94		
24.	Do you ex	oect an increase o	or decrease in your exp	enses within the year after you fil	e this form?			
	For examp	le, do you expect t	to finish paying for your	car loan within the year or do you of a modification to the terms of you	expect your			
	☑ No. ☐ Yes.	None						

## Case 23-40073 Doc 9 Filed 01/19/23 Entered 01/19/23 10:00:34 Desc Main Document Page 37 of 39

Fill in this information	n to identify your case	:		
Debtor 1	_Michael	James	Hardy	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankı	ruptcy Court for the:		Eastern District of Texas	
Case number (if known)	23-40073			

#### Official Form 106Sum

# Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets	
	Your assets Value of what you own
1. Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00 \$32,601.44 \$32,601.44
	Your liabilities Amount you owe
<ol> <li>Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)</li> <li>Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D</li> </ol>	\$4,223.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$1,220.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	<b>+</b> \$85,878.00
Part 3: Summarize Your Income and Expenses	\$91,321.00
4. Schedule I: Your Income (Official Form 106I)  Copy your combined monthly income from line 12 of Schedule I	\$4,501.94
Schedule J: Your Expenses (Official Form 106J)  Copy your monthly expenses from line 22c of Schedule J	\$4,501.00

Case 23-40073 Doc 9 Filed 01/19/23 Entered 01/19/23 10:00:34 Desc Main Document Page 38 of 39

Last Name

Debtor 1 Michael James Hardy

Middle Name

First Name

Case number (if known) 23-40073

Par	Part 4: Answer These Questions for Administrative and Statistical Records					
	re you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the Yes	ne cou	urt with your other sched	ules.		
	hat kind of debt do you have?  Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 to Your debts are not primarily consumer debts. You have nothing to report on this part of the form this form to the court with your other schedules.	J.S.C	. § 159.			
8. <b>F</b> (	om the <i>Statement of Your Current Monthly Income</i> : Copy your total current monthly income from 122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.	Offic	ial	\$7,500.13		
9. <b>C</b>	opy the following special categories of claims from Part 4, line 6 of Schedule E/F:	To	otal claim			
	From Part 4 on Schedule E/F, copy the following:					
	Pa. Domestic support obligations (Copy line 6a.)		\$0.00			
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.)		\$1,220.00			
	Oc. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)		\$0.00			
	9d. Student loans. (Copy line 6f.)		\$65,682.00			
	9e.Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)		\$0.00			
	9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ .	\$0.00			
	9g. <b>Total</b> . Add lines 9a through 9f.	_	\$66,902.00			

## Case 23-40073 Doc 9 Filed 01/19/23 Entered 01/19/23 10:00:34 Desc Main Document Page 39 of 39

Fill in this information	to identify your case:	:		
Debtor 1	Michael	James	Hardy	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankr	uptcy Court for the:		Eastern District of Texas	
Case number (if known)	23-40073			
(ii iaiowii)				

### Official Form 106Dec

#### Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT an atto	orney to help you fill out bankruptcy forms?
√No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have read the su	mmary and schedules filed with this declaration and that they are true and correct.
X /s/ Michael James Hardy	
Michael James Hardy, Debtor 1	
Date <u>01/19/2023</u> MM/ DD/ YYYY	